

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED 2012 JUN -4 AM 8:39

FEC MAIL CENTER

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

Committee to elect Brian Ryan & Doyle to Congress

ADDRESS (number and street)

P.O. Box 1391

Check if different than previously reported. (ACC)

Greenwood

SC

29648

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00515296

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

SC

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

06 / 12 / 2012

in the State of

SC

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

03 / 29 / 2012

through

05 / 28 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Rico M. Gauder

Signature of Treasurer

[Signature]

Date

05 / 29 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

12030820733

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Committee to elect Brian Ryan & Doyle to Congress

Report Covering the Period:

From:

03 ' 29 ' 2012

To:

05 ' 28 ' 2012

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	250.00	250.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	250.00	250.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3,052.52	
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	3,052.52	
8. Cash on Hand at Close of Reporting Period (from Line 27)	40.52	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	11,539.93	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

12030820734

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Committee to elect Brian Ryan B Doyle to Congress

Report Covering the Period: From:

03 29 2012

To:

05 28 2012

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

250.00

(ii) Unitemized.....

(iii) TOTAL of contributions from individuals ▶

250.00

(b) Political Party Committees.....

0.00

(c) Other Political Committees (such as PACs).....

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

250.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

3,100.00

(b) All Other Loans.....

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

3,100.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

3,350.00

12030820735

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	3,052.52	
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	
(b) Political Party Committees.....	0.00	
(c) Other Political Committees (such as PACs).....	0.00	
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	3,052.52	

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	40.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	3,052.52
25. SUBTOTAL (add Line 23 and Line 24).....	3,092.52
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3,052.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	40.52

12030820736

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE	OF
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Committee to elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial)

A. Everette K. Chandler

Mailing Address

264 Summer Creek Drive

City

Grantville

State

SC

Zip Code

29829

FEC ID number of contributing federal political committee.

C

Name of Employer

Chandler Law Firm

Occupation

Attorney

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

25000

Date of Receipt

05 / 04 / 2012

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

12030820737

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 29	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Comm. Ittee to elect Brian Ryan B Doyle to Congress

A. CVS

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: **04 / 10 / 2012**

Mailing Address: *Richland Ave*

City: *Aiken* State: *SC* Zip Code: *29802*

Purpose of Disbursement: *Campaign Supplies* Amount of Each Disbursement this Period: **60.68**

Candidate Name: _____ Category/Type: _____

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____

State: *SC* District: *03*

B. SAKURA stix

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: **04 / 10 / 2012**

Mailing Address: *G*

City: *Greenville* State: *SC* Zip Code: _____

Purpose of Disbursement: *Lunch w/ STAFF* Amount of Each Disbursement this Period: **20.22**

Candidate Name: *Brian Doyle* Category/Type: _____

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

C. BP GAS

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: **04 / 23 / 2012**

Mailing Address: *1318 Edgefield Hwy*

City: *Aiken* State: *SC* Zip Code: *29801*

Purpose of Disbursement: *GAS Travel* Amount of Each Disbursement this Period: **38.00**

Candidate Name: _____ Category/Type: _____

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

SUBTOTAL of Disbursements This Page (optional) **118.90**

TOTAL This Period (last page this line number only)

12030820738

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

17
20a

18
20b

19a
20c

19b
21

PAGE 2 OF 27

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NAME OF COMMITTEE (In Full)
Committee to elect Brian Ryan B Doyle to Congress

A. **Palmetto C-Store #1**
 Mailing Address: **1319 Edgefield Hwy**
 City: **Trenton** State: **SC** Zip Code: _____
 Purpose of Disbursement: **Travel - fuel**
 Candidate Name: _____ Category/Type: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: **SC** District: **03**

Date of Disbursement: **04** / **16** / **2012**
 Amount of Each Disbursement this Period: **25.00**

B. **Sweet Water BP**
 Mailing Address: **1015 Edgefield RD**
 City: **N. Augusta** State: **SC** Zip Code: **29860**
 Purpose of Disbursement: **Travel Fuel vehicle #2**
 Candidate Name: _____ Category/Type: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: **SC** District: **03**

Date of Disbursement: **04** / **23** / **2012**
 Amount of Each Disbursement this Period: **3.00**

C. **Hickory Point 4**
 Mailing Address: **2550 Hwy 25 South**
 City: **Greenwood** State: **SC** Zip Code: **29649**
 Purpose of Disbursement: **Fuel - Travel**
 Candidate Name: _____ Category/Type: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: **SC** District: **03**

Date of Disbursement: **04** / **22** / **2012**
 Amount of Each Disbursement this Period: **30.01**

SUBTOTAL of Disbursements This Page (optional) **85.01**

TOTAL This Period (last page this line number only)

12030820739

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE **3** OF **22**

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (in Full)

Committee to elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial)

A. **Flash Foods**

Mailing Address
2030 Eastonton RD

City **Madison** State **GA** Zip Code **30650**

Purpose of Disbursement
Fuel - Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: **SC** District: **03**

Date of Disbursement

04 / 15 / 2012

Amount of Each Disbursement this Period

40.00

B. **Billy's Superstore**

Mailing Address
799 Hwy 121

City **Johnston** State **SC** Zip Code **29832**

Purpose of Disbursement
Fuel - Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: **SC** District: **03**

Date of Disbursement

04 / 16 / 2012

Amount of Each Disbursement this Period

35.00

C. **STAPLES**

Mailing Address
660 Ponce De Leon Ave

City State Zip Code

Purpose of Disbursement
office Supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: **SC** District: **03**

Date of Disbursement

04 / 17 / 2012

Amount of Each Disbursement this Period

8.20

SUBTOTAL of Disbursements This Page (optional).....

83.20

TOTAL This Period (last page this line number only).....

12030820740

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Committee to elect Brian Ryan B Doyle to Congress

A. Full Name (Last, First, Middle Initial) **Sam's Mart #522**

Date of Disbursement **04 / 17 / 2012**

Mailing Address **1892 Howell M.H RD**

City **Greenwood** State **SC** Zip Code

Purpose of Disbursement **Fuel Travel** Amount of Each Disbursement this Period **20.04**

Candidate Name Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **SC** District: **03**

B. Full Name (Last, First, Middle Initial) **Circle K Store 5350**

Date of Disbursement **04 / 16 / 2012**

Mailing Address **115 Laurel Lakes Dr.**

City **North Augusta** State **SC** Zip Code **29841**

Purpose of Disbursement **Fuel Travel** Amount of Each Disbursement this Period **20.00**

Candidate Name Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **SC** District: **03**

C. Full Name (Last, First, Middle Initial) **Econo Lodge**

Date of Disbursement **04 / 22 / 2012**

Mailing Address **719 BYPASS 25 NE**

City **Greenwood** State **SC** Zip Code **29646**

Purpose of Disbursement **Over Night STAY ROOM #1 STAFF CAMPAIGN** Amount of Each Disbursement this Period **79.92**

Candidate Name Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **SC** District: **03**

SUBTOTAL of Disbursements This Page (optional) **119.96**

TOTAL This Period (last page this line number only)

12030820741

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE **5** OF **22**

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Committee to Elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial)

A. Cracker Barrel Store #689

Mailing Address: **Wiskey RD**

City: **Aiken** State: **SC** Zip Code: **29802**

Purpose of Disbursement: **STAFF - Breakfast**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **SC** District: **03**

Date of Disbursement

04 / 12 / 2012

Amount of Each Disbursement this Period

40.53

Full Name (Last, First, Middle Initial)

B. SHELL

Mailing Address: **3228 Hwy 25 South**

City: **Greenwood** State: **SC** Zip Code: **29646**

Purpose of Disbursement: **Fuel - Travel**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **SC** District: **03**

Date of Disbursement

04 / 21 / 2012

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. FAscopy Printing

Mailing Address: **428 Hayne Ave**

City: **Aiken** State: **SC** Zip Code: **29801**

Purpose of Disbursement: **Coping Supplies**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **SC** District: **03**

Date of Disbursement

04 / 23 / 2012

Amount of Each Disbursement this Period

5.14

SUBTOTAL of Disbursements This Page (optional).....

70.67

TOTAL This Period (last page this line number only).....

12030820742

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE **6** OF **24**

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Committee to elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial)

A. QuikTip

Mailing Address

City **Anderson** State **SC** Zip Code

Purpose of Disbursement

Fuel - Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: **SC** District: **03**

Date of Disbursement

04 / **21** / **2012**

Amount of Each Disbursement this Period

30.04

Full Name (Last, First, Middle Initial)

B. Chick-Fil-A

Mailing Address

Clemson Blvd

City **Anderson** State **SC** Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: **SC** District: **03**

Date of Disbursement

04 / **21** / **2012**

Amount of Each Disbursement this Period

12.06

Full Name (Last, First, Middle Initial)

C. Hickory Point 21

Mailing Address

3498 Belton Hwy

City **Anderson** State **SC** Zip Code

Purpose of Disbursement

Travel Fuel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: **SC** District: **03**

Date of Disbursement

04 / **22** / **2012**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

62.00

12030820743

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE **7** OF **27**

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Committee to Elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial)

A. Quality INN

Mailing Address: **719 By Pass 25 NE**

City: **Greenwood** State: **SC** Zip Code: **29646**

Purpose of Disbursement: **Hotel Room #2 Staff**

Candidate Name: _____

Office Sought: House Senate President
State: **SC** District: **03**

Disbursement For: Primary General Other (specify)

Date of Disbursement

04 / 22 / 2012

Amount of Each Disbursement this Period

79.92

B. Maevin Houston Video Production

Mailing Address: **1390 Frank ST**

City: **Columbia** State: **SC** Zip Code: _____

Purpose of Disbursement: **Video editing**

Candidate Name: _____

Office Sought: House Senate President
State: **SC** District: **03**

Disbursement For: Primary General Other (specify)

Date of Disbursement

04 / 13 / 2012

Amount of Each Disbursement this Period

70.00

C. Citgo food Mart

Mailing Address: _____

City: **Aiken** State: **SC** Zip Code: **29801**

Purpose of Disbursement: **Fuel - Travel**

Candidate Name: _____

Office Sought: House Senate President
State: **SC** District: **03**

Disbursement For: Primary General Other (specify)

Date of Disbursement

05 / 11 / 2012

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

199.92

12030820744

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE **8** OF **27**

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Committee to elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial)

A. Kroger Fuel Center

Mailing Address

City State Zip Code

Purpose of Disbursement
Fuel Travel

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: SC District: 03

Date of Disbursement

05 04 2012

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Duik Trip

Mailing Address

City State Zip Code
Anderson SC

Purpose of Disbursement
Fuel Travel

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: SC District: 03

Date of Disbursement

05 04 2012

Amount of Each Disbursement this Period

15.01

Full Name (Last, First, Middle Initial)

C. EL CHEAPO Clinton

Mailing Address

401 W. Carolina Ave

City State Zip Code
Clinton SC 29325

Purpose of Disbursement
Fuel for Travel

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: SC District: 03

Date of Disbursement

05 05 2012

Amount of Each Disbursement this Period

45.00

SUBTOTAL of Disbursements This Page (optional).....

100.01

TOTAL This Period (last page this line number only).....

12030820745

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 22

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Committee to Elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial)

A. Golden Corral

Mailing Address

City Anderson State SC Zip Code

Purpose of Disbursement

Lunch - Campaign

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: SC District: 03

Date of Disbursement

05 / 07 / 2012

Amount of Each Disbursement this Period

17.04

B. SUNCO

Mailing Address

7605 Hwy 16

City Pendleton State SC Zip Code 29670

Purpose of Disbursement

Fuel Campaign

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: SC District: 03

Date of Disbursement

05 / 07 / 2012

Amount of Each Disbursement this Period

56.00

C. BP GAS

Mailing Address

City Anderson State SC Zip Code 2

Purpose of Disbursement

Fuel - Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: SC District: 03

Date of Disbursement

04 / 20 / 2012

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)

123.04

TOTAL This Period (last page this line number only)

12030820746

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 22	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
 Committee to elect Brian Ryan B Doyle to Congress

A. <u>Quick Trip</u> Full Name (Last, First, Middle Initial)		Date of Disbursement 05 ' 01 ' 2012
Mailing Address		Amount of Each Disbursement this Period 51.53
City <u>Anderson SC</u>	State Zip Code	
Purpose of Disbursement <u>Fuel - Travel vehicle # 1</u>		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>SC</u> District: <u>03</u>		

B. <u>Quick Trip</u> Full Name (Last, First, Middle Initial)		Date of Disbursement 05 ' 01 ' 2012
Mailing Address		Amount of Each Disbursement this Period 50.00
City <u>Anderson SC</u>	State Zip Code	
Purpose of Disbursement <u>Fuel - Travel vehicle # 2</u>		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>SC</u> District: <u>03</u>		

C. <u>Circle K</u> Full Name (Last, First, Middle Initial)		Date of Disbursement 04 ' 22 ' 2012
Mailing Address <u>2999 Washington RD</u>		Amount of Each Disbursement this Period 30.00
City <u>Augusta GA</u>	State Zip Code	
Purpose of Disbursement <u>Fuel Travel</u>		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>SC</u> District: <u>03</u>		

SUBTOTAL of Disbursements This Page (optional).....	131.53
TOTAL This Period (last page this line number only).....	

12030820747

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Committee to elect Brian Ryan B Doyle to Congress

12030820748

A. Quick Trip

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City **Anderson** State **SC** Zip Code _____

Purpose of Disbursement **Fuel - Travel**

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: **SC** District: **03**

Date of Disbursement: **04** / **17** / **2012**

Amount of Each Disbursement this Period: **35.00**

B. Bountyland # 4

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City **Fair Play** State **SC** Zip Code _____

Purpose of Disbursement **Fuel - Travel**

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: **SC** District: **03**

Date of Disbursement: **05** / **07** / **2012**

Amount of Each Disbursement this Period: **25.00**

C. Raceway # 6750

Full Name (Last, First, Middle Initial) _____

Mailing Address **4606 Clemson Blvd**

City **Anderson** State **SC** Zip Code **29621**

Purpose of Disbursement **Fuel - Travel**

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: **SC** District: **03**

Date of Disbursement: **05** / **12** / **2012**

Amount of Each Disbursement this Period: **20.00**

SUBTOTAL of Disbursements This Page (optional) **80.00**

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

17 18 19a 19b
20a 20b 20c 21

PAGE 12 OF 22

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NAME OF COMMITTEE (In Full)
Committee to Elect Brian Ryan B Doyle to Congress

A. Raceway #6750

Full Name (Last, First, Middle Initial) _____

Mailing Address 4606 Clemson Blvd

City Anderson State SC Zip Code 29621

Purpose of Disbursement Fuel - Travel

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: SC District: 03

Date of Disbursement: 04 / 29 / 2012

Amount of Each Disbursement this Period: 33.32

B. High Volume 1

Full Name (Last, First, Middle Initial) _____

Mailing Address 1003 Pearman Dairy RD

City Anderson State SC Zip Code 29625

Purpose of Disbursement Fuel - Travel

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: SC District: 03

Date of Disbursement: 04 / 29 / 2012

Amount of Each Disbursement this Period: 50.00

C. Golden Corral

Full Name (Last, First, Middle Initial) _____

Mailing Address Clemson Blvd

City Anderson State SC Zip Code 29625

Purpose of Disbursement Staff Lunch

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: SC District: 03

Date of Disbursement: 04 / 29 / 2012

Amount of Each Disbursement this Period: 69.01

SUBTOTAL of Disbursements This Page (optional)..... 152.33

TOTAL This Period (last page this line number only).....

12030820749

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Committee to elect Brian Ryan B Doyle

Full Name (Last, First, Middle Initial)

A. *Sam's Mart #522*

Date of Disbursement

05' 24' 2012

Mailing Address

1892 Howell Mills RD

Amount of Each Disbursement this Period

50.01

City

ATL

State

GA

Zip Code

30309

Purpose of Disbursement

Travel regarding Campaign

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: *SC*

District: *03*

Full Name (Last, First, Middle Initial)

B. *Sam's Mart #522*

Date of Disbursement

05' 20' 2012

Mailing Address

1892 Howell Mills RD

Amount of Each Disbursement this Period

80.00

City

ATL

State

GA

Zip Code

30318

Purpose of Disbursement

Fuel Travel

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: *SC*

District: *03*

Full Name (Last, First, Middle Initial)

C. *Race Trac Fuel*

Date of Disbursement

05' 16' 2012

Mailing Address

Amount of Each Disbursement this Period

45.00

City

Greenville

State

SC

Zip Code

Purpose of Disbursement

Fuel Travel

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: *SC*

District: *03*

SUBTOTAL of Disbursements This Page (optional).....

175.01

TOTAL This Period (last page this line number only).....

12030820750

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

17 18 19a 19b
 20a 20b 20c 21

PAGE 14 OF 22

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NAME OF COMMITTEE (In Full)
Comm. Htee to elect Brian Ryan B Doyle to Congress

A. FLASH Foods #182

Full Name (Last, First, Middle Initial)

Mailing Address: 2030 Entanton RD

City: Madison State: GA Zip Code: 30650

Purpose of Disbursement: State Convention Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: SC District: 03

Date of Disbursement: 05' 12' 2012

Amount of Each Disbursement this Period: 68.00

B. KENTS Kerner #21

Full Name (Last, First, Middle Initial)

Mailing Address: 2220 Broad River RD

City: Columbia State: SC Zip Code: 29210

Purpose of Disbursement: Fuel - State Convention

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: SC District: 03

Date of Disbursement: 05' 12' 2012

Amount of Each Disbursement this Period: 57.50

C. Sign depot

Full Name (Last, First, Middle Initial)

Mailing Address: 1813 E. Colonial dr.

City: Orlando State: FL Zip Code: 32803

Purpose of Disbursement: Sign Campaign Signs

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: SC District: 03

Date of Disbursement: 04' 26' 2012

Amount of Each Disbursement this Period: 560.00

SUBTOTAL of Disbursements This Page (optional) 685.50

TOTAL This Period (last page this line number only)

12030820751

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
 Committee to elect Brian Ryan B Doyle to Congress

A. **Houston's Rest.**

Full Name (Last, First, Middle Initial)

Mailing Address: 2143 Peachtree St RD NE

City: ATLANTA State: GA Zip Code: 30309

Purpose of Disbursement: Campaign meeting lunch

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: SC District: 03

Date of Disbursement: 04/29/2012

Amount of Each Disbursement this Period: 55.03

B. **Palmetto C-Store**

Full Name (Last, First, Middle Initial)

Mailing Address: 1318 Edgeland Hwy

City: Aiken State: SC Zip Code: 29801

Purpose of Disbursement: Fuel Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: SC District: 03

Date of Disbursement: 04/30/2012

Amount of Each Disbursement this Period: 40.00

C. **Zaxby's**

Full Name (Last, First, Middle Initial)

Mailing Address: 100 Commons Dr.

City: Anderson State: SC Zip Code

Purpose of Disbursement: Lunch Campaign

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: SC District: 03

Date of Disbursement: 04/27/2012

Amount of Each Disbursement this Period: 20.93

SUBTOTAL of Disbursements This Page (optional) 115.96

TOTAL This Period (last page this line number only)

12030820752

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Committee to Elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial)

A. Race Way

Mailing Address U.S. Hwy 1

City Aiken State SC Zip Code 29801

Purpose of Disbursement Fuel Travel veh. # 1

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Date of Disbursement

04 / 30 / 2012

Amount of Each Disbursement this Period

30.01

B. Race Way

Mailing Address U.S. Hwy 1

City Aiken State SC Zip Code 29801

Purpose of Disbursement Fuel Travel Veh # 2

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: SC District: 03

Date of Disbursement

04 / 30 / 2012

Amount of Each Disbursement this Period

55.01

C. Love's # 387

Mailing Address 4238 Old Dobbins RD

City Fair Play State SC Zip Code _____

Purpose of Disbursement Fuel - Travel

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: SC District: 03

Date of Disbursement

04 / 27 / 2012

Amount of Each Disbursement this Period

30.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

115.02

12030820753

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE **17** OF **22**

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Committee to elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial)

A. *Ryan's Steak House*

Date of Disbursement

04 27 2012

Mailing Address

City *Greenwood* State *SC* Zip Code

Amount of Each Disbursement this Period

33.99

Purpose of Disbursement
Staff Luncheon

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: *SC* District: *03*

Full Name (Last, First, Middle Initial)

B. *SAM's Mart*

Date of Disbursement

04 30 2012

Mailing Address

City *Atlanta* State *GA* Zip Code *30318*

Amount of Each Disbursement this Period

89.00

Purpose of Disbursement
Fuel Travel

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: *SC* District: *03*

Full Name (Last, First, Middle Initial)

C. *Ryan's*

Date of Disbursement

04 29 2012

Mailing Address

City *Commerce* State *GA* Zip Code *30529*

Amount of Each Disbursement this Period

33.99

Purpose of Disbursement
Staff Luncheon

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: *SC* District: *03*

SUBTOTAL of Disbursements This Page (optional).....

156.98

TOTAL This Period (last page this line number only).....

12030820754

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Committee to elect Brian Ryan B. Dayle to Congress

A. *Waffle House #973*

Full Name (Last, First, Middle Initial)

Mailing Address: *2519 Whiskey RD*

City: *Aiken* State: *SC* Zip Code: *29803*

Purpose of Disbursement: *STAFF - luncheon*

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: *SC* District: *03*

Date of Disbursement: *05 / 13 / 2012*

Amount of Each Disbursement this Period: *20.53*

B. *Kent's Corner #15*

Full Name (Last, First, Middle Initial)

Mailing Address: *1925 Edgelyfield Hwy*

City: *Aiken* State: *SC* Zip Code: *29801*

Purpose of Disbursement: *Fuel - TRAVEL*

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: *SC* District: *03*

Date of Disbursement: *05 / 12 / 2012*

Amount of Each Disbursement this Period: *20.00*

C. *Love's Fuel*

Full Name (Last, First, Middle Initial)

Mailing Address

City: *Commerce* State: *GA* Zip Code

Purpose of Disbursement: *Fuel - TRAVEL*

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: *SC* District: *03*

Date of Disbursement: *05 / 26 / 2012*

Amount of Each Disbursement this Period: *50.00*

SUBTOTAL of Disbursements This Page (optional) *90.53*

TOTAL This Period (last page this line number only)

12030820755

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE <u>19</u> OF <u>22</u>			
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
** Comm. the to elect Brian Ryan B Doyle to congress*

A. Full Name (Last, First, Middle Initial) *Race way #6905*

Mailing Address *1981 Eatonton Hwy*

City *Madison* State *GA* Zip Code *30650*

Purpose of Disbursement *Fuel - staff*

Candidate Name _____ Category/Type _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: *SC* District: *03*

Date of Disbursement *05/27/2012*

Amount of Each Disbursement this Period *40.00*

B. Full Name (Last, First, Middle Initial) *DISCOUNT CORNER*

Mailing Address *1508 E River St*

City *Anderson* State *SC* Zip Code *29620*

Purpose of Disbursement *Fuel - Travel*

Candidate Name _____ Category/Type _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: *SC* District: *03*

Date of Disbursement *04/13/2012*

Amount of Each Disbursement this Period *300.1*

C. Full Name (Last, First, Middle Initial) *PIZZA HUT*

Mailing Address *Clemson Hwy*

City *Anderson* State *SC* Zip Code *29620*

Purpose of Disbursement *STAFF - luncheon*

Candidate Name _____ Category/Type _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: *SC* District: *03*

Date of Disbursement *05/26/2012*

Amount of Each Disbursement this Period *29.38*

SUBTOTAL of Disbursements This Page (optional) *99.39*

TOTAL This Period (last page this line number only)

12030820756

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

12030820757

A. Raceway #6726

Full Name (Last, First, Middle Initial)

Mailing Address 1920 Washington RD

City Augusta State GA Zip Code 30390

Purpose of Disbursement Fuel - TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: SC District: 03

Date of Disbursement 04' 27' 2012

Amount of Each Disbursement this Period 20.00

B. Burger King

Full Name (Last, First, Middle Initial)

Mailing Address 3407 DEANS BRIDGE

City Augusta State GA Zip Code 30906

Purpose of Disbursement STAFF LUNCHES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: SC District: 03

Date of Disbursement 04' 27' 2012

Amount of Each Disbursement this Period 20.29

C. Hickory Point #40

Full Name (Last, First, Middle Initial)

Mailing Address 100 S. Greenwood ST

City Abbeville State SC Zip Code 29620

Purpose of Disbursement Fuel - TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: SC District: 03

Date of Disbursement 05' 27' 2012

Amount of Each Disbursement this Period 30.00

SUBTOTAL of Disbursements This Page (optional)..... 90.29

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 22

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Committee to elect Brian Ryan B Doyle to Congress

Full Name (Last, First, Middle Initial)

A. <i>Pilot Travel Center</i>		Date of Disbursement
Mailing Address <i>1801 Eatonton RD</i>		<i>05 / 20 / 2010</i>
City <i>Madison</i>	State <i>GA</i>	Amount of Each Disbursement this Period <i>45.00</i>
Zip Code <i>30050</i>		
Purpose of Disbursement <i>Fuel - Travel staff</i>		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <i>SC</i>	District: <i>03</i>	

B. <i>Circle K # 3184</i>		Date of Disbursement
Mailing Address <i>1055 Edgetfield RD</i>		<i>05 / 14 / 2012</i>
City <i>North Augusta</i>	State <i>SC</i>	Amount of Each Disbursement this Period <i>30.01</i>
Zip Code		
Purpose of Disbursement <i>Fuel travel</i>		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <i>SC</i>	District: <i>03</i>	

C. <i>Gregs GAS Plus # 9</i>		Date of Disbursement
Mailing Address <i>1186 Edgetfield RD</i>		<i>05 / 20 / 2012</i>
City <i>N. Augusta</i>	State <i>SC</i>	Amount of Each Disbursement this Period <i>48.00</i>
Zip Code <i>29860</i>		
Purpose of Disbursement <i>Fuel - travel</i>		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <i>SC</i>	District: <i>03</i>	

SUBTOTAL of Disbursements This Page (optional).....

123.01

TOTAL This Period (last page this line number only).....

12030820758

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

17 18 19a 19b
 20a 20b 20c 21

PAGE 27 OF 29

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NAME OF COMMITTEE (In Full)
Committee to elect Brian Ryan B Doyle to Congress

12030820759

A. CHINA EXPRESS

Full Name (Last, First, Middle Initial)

Mailing Address: *3450 WRIGHTBORO RD*

City: *Augusta* State: *GA* Zip Code: *30909*

Purpose of Disbursement: *STAFF UNCLEAN*

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: *SC* District: *03*

Date of Disbursement: *05/12/2012*

Amount of Each Disbursement this Period: *24.13*

B. GREGG'S GAS Plus

Full Name (Last, First, Middle Initial)

Mailing Address

City: *North* State: *Augusta* Zip Code: *SC*

Purpose of Disbursement: *Fuel Travel*

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: *SC* District: *03*

Date of Disbursement: *05/16/2012*

Amount of Each Disbursement this Period: *25.01*

C. SAM'S Mart #522

Full Name (Last, First, Middle Initial)

Mailing Address: *1892 HOWELL M.V RD*

City: *ATLANTA* State: *GA* Zip Code: *30318*

Purpose of Disbursement: *STAFF FUEL TRAVEL*

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: *SC* District: *03*

Date of Disbursement: *05/19/2012*

Amount of Each Disbursement this Period: *25.02*

SUBTOTAL of Disbursements This Page (optional) *74.16*

TOTAL This Period (last page this line number only)

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full)
Committee to Elect Brian Ryan B Doyle

LOAN SOURCE Full Name (Last, First, Middle Initial) <i>Brian L Doyle</i>	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address <i>P.O. Box 1391</i>	
City <i>Greenwood</i>	State <i>SC</i>
	ZIP Code

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

TERMS

Date Incurred MM / DD / YYYY	Date Due MM / DD / YYYY	Interest Rate <input type="text"/> % (apr)	Secured: <input type="checkbox"/> Yes <input type="checkbox"/> No
---------------------------------	----------------------------	---	--

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....	<input type="text"/>
TOTALS This Period (last page in this line only).....	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

12030820760

SCHEDULE C-1 (FEC Form 3)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
 Information found on
 Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <i>Committee to elect Brian Ryan B Doyle</i>	FEC IDENTIFICATION NUMBER C 00515296
---	--

LENDING INSTITUTION (LENDER) Full Name <i>N/A</i>	Amount of Loan _____	Interest Rate (APR) _____ %
Mailing Address <i>N/A</i>	Date Incurred or Established MM / DD / YYYY	_____ / _____ / _____
City _____ State _____ Zip Code _____	Date Due MM / DD / YYYY	_____ / _____ / _____

A. Has loan been restructured? No Yes If yes, date originally incurred MM / DD / YYYY

B. If line of credit, Amount of this Draw: _____ Total Outstanding Balance: _____

C. Are other parties secondarily liable for the debt incurred?
 No Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
 No Yes If yes, specify: _____

What is the value of this collateral?

Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: _____

What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).

Date account established: MM / DD / YYYY

Location of account: _____
 Address: _____
 City, State, Zip: _____

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name Signature	DATE MM / DD / YYYY
---	------------------------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	Title	DATE MM / DD / YYYY
--	-------	------------------------

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SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE OF

FOR LINE NUMBER: (check only one)

9
10

NAME OF COMMITTEE (In Full)

Committee to elect Brian Ryan B Doyle to Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Brian Doyle

Nature of Debt (Purpose):

Loan to the Campaign

Mailing Address

P.O. Box 1391

City State

Greenwood SC 29648

Outstanding Balance Beginning This Period

8487.41

Amount Incurred This Period

3,052.52

Payment This Period

0.00

Outstanding Balance at Close of This Period

11,539.93

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional) ▶

2) TOTALS This Period (last page this line number only) ▶

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Empty boxes for totals and carry forward.

12030820762

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full) <i>Committee to elect Brian Ryan B Doyle to Congress</i>	Report Covering Period: From: 03 29 2012 To: 05 28 2012
--	--

Committee Name	(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
A		
B		

	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A	0.00	250. ⁰⁰	250. ⁰⁰	0.00	11,539. ⁹³	0.00
B						
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A	3,100	0.00	0.00	3,350. ⁰⁰	3,052. ⁵²	0.00
B	11,539. ⁹³	0.00	0.00	11,539. ⁹³	11,539. ⁹³	0.00
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A	0.00	0.00	0.00	0.00	0.00	0.00
B	0.00	0.00	0.00	0.00	0.00	0.00
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A	0.00	0.00	3,052.52	40. ⁰⁰	40. ⁰⁰	0.00
B	0.00	0.00	11,539.93	40. ⁰⁰	40. ⁰⁰	0.00
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A	11,539.93	250. ⁰⁰	3,052.52			
B		250. ⁰⁰	11,539.93			

12030820763

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
5/30/12
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

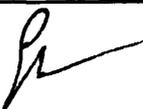
Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

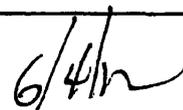
Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked



PREPARER
(3/2005)



DATE PREPARED

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